

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 668113

FILED
Feb 11, 2004
Secretary of State

Entity Name: INNOVATIVE TECHNOLOGY, INC.

Current Principal Place of Business:

15470 FLIGHT PATH DR
BROOKSVILLE, FL 34609

New Principal Place of Business:

2820 WATERFORD LAKE DRIVE
MIDLOTHIAN, VA 23112

Current Mailing Address:

C/O INDUSTRIAL GALVANIZERS
2820 WATERFORD LAKE DRIVE STE 202
MIDLOTHIAN, VA 23112 US

New Mailing Address:

FEI Number: 59-2009226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAMPION, KEVIN
Address: 15470 FLIGHT PATH DR.
City-St-Zip: BROOKSVILLE, FL 34609

Title: DTS () Delete
Name: BOUZAKIS, ELIAS G
Address: 2820 WATERFORD LAKE DRIVE STE 202
City-St-Zip: MIDLOTHIAN, VA 23112

Title: VPF (X) Delete
Name: CUSTIN, MARGIE
Address: 15470 FLIGHT PATH DR.
City-St-Zip: BROOKSVILLE, FL 34609

Title: ATS (X) Delete
Name: CORAL, MICHELLE
Address: 15470 FLIGHT PATH DR.
City-St-Zip: BROOKSVILLE, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHEPPARD, SHAUN G
Address: 2820 WATERFORD ALKE DRIVE STE 202
City-St-Zip: MIDLOTHIAN, VA 23112

Title: S (X) Change () Addition
Name: SCHRIDER, JOHN
Address: 2820 WATERFORD LAKE DRIVE STE 202
City-St-Zip: MIDLOTHIAN, VA 23112

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHAUN SHEPPARD

D

02/11/2004

Electronic Signature of Signing Officer or Director

_____ Date